

## ISSUE SLIP STAPLE AREA (for additional cross references)

JZ/1080

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		10	9-10-01
<b>FORMALITY REVIEW</b>	S.A	1085	10-12-01
<b>RESPONSE FORMALITY REVIEW</b>	Z-M	927	03/11/02

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	10/2/02
Original	
1	✓
2	✓
3	✓✓
4	✓✓
5	✓✓
6	✓✓
7	✓✓
8	✓✓
9	✓✓
10	✓✓
11	✓✓
12	✓✓
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14	✓✓
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Claim	Date
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Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

87/201  
10/11/02  
5/11/02  
M.J.O  
154